Department of Labor & Industries Apprenticeship Section PO Box 44530 Olympia WA 98504-4530



APPRENTICESHIP APPLICANT REGISTER

For Periodto	20												Pa	age	of	f pages
Ethnic Group A - Asian B - Black of African American I - American Indian or Alaska Native H - Hispanic N - Native Hawaiian Pacific Islander W - White U - Not Elsewhere Classified Application No. Name		Education Level: 1 - 8th Grade or less 2 - 9th - 12th 3 - GED 4 - High school 5 - College or greater Printed or typed)	Ethnic Group	Hispanic origin (Yes/no)	Gender	Current Education level	Application Issued	Application Returned	Age Verified (Input age) Birth Certificate	Residency Verified Drivers License	School Records Verified	Social Security Card	Application Completed	Notified to appear for Interview	Interviewed and evaluated	DISPOSITION S - Selected NS - Not Selected D - Disqualified O- Other, Explain (Do not complete: for office use only)